PLEASE TYPE C	OR PRINT		
☐ Ms.	T	Dace	-111
Mr. Artist	JIM	MAC	711
			(Last Name Last
Permanent Address	250 RIVER	BED	deus
	Street	C	City
44113	Daytime Tel. 🐼	6) 941-	0310
Zip	Area Code	575 -	9040
Temporary or Studio Address			
	Street	C	City
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Zip	Area Code		
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If you do not pro Western Reserve Collaborator	esently live in one of t e, in which county were	you born?	
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This Entry Blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 21, 1985.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information

Signature



	1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Crafts								
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	016	0.	N B	OHK	R	-	~ l		
					No	R	per		
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#5	65.00 GRAPHICS AND PHOTOGRAPHY ONLY								
10	Additional No. For Sale	Tot	al No. in Edit	ion	Price Unframe	ed	Price of Frame		
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DE	Materials								
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